

Exhibit 300: Capital Asset Plan and Business Case Summary

Part I: Summary Information And Justification (All Capital Assets)

Section A: Overview

1. **Date of Submission:** 2011-02-22

2. **Agency:** 007

3. **Bureau:** 97

4. **Name of this Investment:** THEATER MEDICAL INFORMATION PROGRAM-Joint

5. **Unique Project (Investment) Identifier (UPI):** 007-97-05-17-01-1913-00

6. **What kind of investment will this be in FY 2012?:** Mixed Life Cycle

- Planning
- Full Acquisition
- Operations and Maintenance
- Mixed Life Cycle
- Multi-Agency Collaboration

7. **What was the first budget year this investment was submitted to OMB?** FY2001 or earlier

8.

- a. **Provide a brief summary of the investment and justification, including a brief description of how this closes in part or in whole an identified agency performance gap, specific accomplishments expected by the budget year and the related benefit to the mission, and the primary beneficiary(ies) of the investment.**

Description: The Theater Medical Information Program - Joint (TMIP-J) integrates components of the Military Health System sustaining base systems and the Services' medical information systems to ensure timely interoperable medical support for mobilization, deployment and sustainment of all Theater and deployed forces in support of any mission. TMIP-J enhances the clinical care and information capture at all levels of care in Theater, transmits critical information to the Theater Commander, the evacuation chain for combat and non-combat casualties, and forges the theater links of the longitudinal health record to the sustaining base and the Department of Veterans Affairs. TMIP-J is the medical component of the Global Combat Support System. TMIP-J provides information at the point of care and to the Theater tactical and strategic decision makers through efficient, reliable data capture, and data transmission to a centralized Theater database. This delivers TMIP-J's four pillars of information support through the electronic health record, integrated medical logistics, patient movement and tracking, and medical command and control through data aggregation, reporting and analysis tools for trend analysis and situational awareness. TMIP-J fulfills the premise of "Train as you fight" through the integration of its family of systems which are identical or analogous to systems from the sustaining base. TMIP-J adapts and integrates these systems to specific Theater requirements and assures their availability in the no- and low- communications settings of the deployed environment through store and forward capture and transmission technology. Planned accomplishments: Continue to develop software Block 2 releases which converge with the electronic health record; transfer encounters via removable media; upgrades to Defense Medical Logistics Standard Support; and Patient Movement Items Tracking System. Will also provide the capability to monitor medical readiness for service members and for groups of individuals (units) within the theater. .

- b. **Provide any links to relevant websites that would be useful to gain additional information on the investment including links to GAO and IG reports.**

Title	Link
NONE	

9.

a. **Provide the date of the Agency's Executive/Investment Committee approval of this investment.**

1995-06-01

b. **Provide the date of the most recent or planned approved project charter.** 1995-06-0110. **Contact information?**a. **Program/Project Manager Name:** ***Phone Number:** ***Email:** *b. **Business Function Owner Name (i.e. Executive Agent or Investment Owner):** Ms. Maryann Rockey**Phone Number:** ***Email:** *11. **What project management qualifications does the Project Manager have? (choose only one per****FAC-P/PM or DAWIA):** Project manager assigned to investment, but does not meet requirements according to FAC-P/PM or DAWIA criteria.

- Project manager has been validated according to FAC-P/PM or DAWIA criteria as qualified for this investment.
- Project manager qualifications according to FAC-P/PM or DAWIA criteria is under review for this investment.
- Project manager assigned to investment, but does not meet requirements according to FAC-P/PM or DAWIA criteria.
- Project manager assigned but qualification status review has not yet started.
- No project manager has yet been assigned to this investment.

Section B: Summary of Funding (Budget Authority for Capital Assets)

1.

Table I.B.1: Summary of Funding
(In millions of dollars)

(Estimates for BY+1 and beyond are for planning purposes only and do not represent budget decisions)

	PY-1 and earlier	PY 2010	CY 2011 (CY Continuing Resolution)	BY 2012	BY+1 2013	BY+2 2014	BY+3 2015	BY+4 and beyond	Total
Planning:	*	*	*	*	*	*	*	*	*
Acquisition:	*	*	*	*	*	*	*	*	*
Planning & Acquisition Government FTE Costs	*	*	*	*	*	*	*	*	*
Subtotal Planning & Acquisition(DME):	*	*	*	*	*	*	*	*	*
Operations & Maintenance:	*	*	*	*	*	*	*	*	*
Disposition Costs (optional):	*	*	*	*	*	*	*	*	*
Operations, Maintenance, Disposition Government FTE Costs	*	*	*	*	*	*	*	*	*
Subtotal O&M and Disposition Costs (SS):	*	*	*	*	*	*	*	*	*
TOTAL FTE Costs	*	*	*	*	*	*	*	*	*
TOTAL (not including FTE costs):	*	*	*	*	*	*	*	*	*
TOTAL (including FTE costs):	*	*	*	*	*	*	*	*	*
Number of FTE represented by	*	*	*	*	*	*	*	*	*

Table I.B.1: Summary of Funding
(In millions of dollars)

(Estimates for BY+1 and beyond are for planning purposes only and do not represent budget decisions)

	PY-1 and earlier	PY 2010	CY 2011 (CY Continuing Resolution)	BY 2012	BY+1 2013	BY+2 2014	BY+3 2015	BY+4 and beyond	Total
Costs:									

2. Insert the number of years covered in the column “PY-1 and earlier”: 2

3. Insert the number of years covered in the column “BY+4 and beyond”: *

4. If the summary of funding has changed from the FY 2011 President’s Budget request, briefly explain those changes:

*

Section C: Acquisition/Contract Strategy (All Capital Assets)

1.

Table I.C.1 Contracts Table

Contract Status	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	Solicitation ID	Alternative financing	EVM Required	Ultimate Contract Value (M)	Type of Contract/Task Order (Pricing)	Is the contract a Performance Based Service Acquisition (PBSA)?	Effective date	Actual or expected End Date of Contract/Task Order	Extent Competed	Short description of acquisition
Awarded		0013	W74V8H04D0024		*	*	\$10,526,618.8	Cost Plus Fixed Fee	Y	2009-09-24	2012-11-30	Y	AHLTA Theater Sustainment
Awarded		0010	W81XWH08D0028	W81XWH05R0004	*	*	\$64,538,277.5	Cost Plus Fixed Fee	Y	2009-12-17	2012-12-31	Y	DHIMS Garrison DT&E services
Awarded		0008	W81XWH08D0028	W81XWH05R0004	*	*	\$49,636,970.6	Firm Fixed Price	Y	2009-09-25	2012-11-30	Y	DHIMS -Theater Support
Awarded		0007	W81XWH08D0031	W81XWH05R0004	*	*	\$17,687,507.2	Combination (two or more)	Y	2009-09-17	2012-11-29	Y	Base Period Effort 2 Theater
Awarded		0002	W74V8H04D020		*	*	\$10,819,210.4	Firm Fixed Price	Y	2008-09-29	2010-09-29	Full and Open Competition after exclusion of sources	This PWS provides for systems support services to enhance the quality & timeliness of support for in-theater

Table I.C.1 Contracts Table

Contract Status	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	Solicitation ID	Alternative financing	EVM Required	Ultimate Contract Value (M)	Type of Contract/Task Order (Pricing)	Is the contract a Performance Based Service Acquisition (PBSA)?	Effective date	Actual or expected End Date of Contract/Task Order	Extent Competed	Short description of acquisition
													users of the currently deployed theater imaging capability and availability of stored images to MTFs.
Awarded		W81XH08F0997	GS35F0234K		*	*	\$28,155,682.1	Time and Materials	Y	2008-09-30	2011-11-30	Full and Open Competition	This PWS is for the consolidated design, development and sustainment of the Joint Medical Workstation (JMeWS) and the Theater Medical Data Store (TMDS).
Awarded		W81XWH07F0394	GS35F0234K		*	*	\$8,234,841.0	Time and Materials	Y	2007-08-16	2010-08-19	Y	Theater Medical Information Program

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Awarded		0016	W74V8H04D0036		*	*	\$51,588,579.3	Combination (two or more)	Y	2007-09-16	2011-12-31	Y	Base Period Labor (RDT&E)
Awarded		W81XWH06F0377	GS35F0234K		*	*	\$11,847,047.8	Time and Materials	N	2006-09-25	2011-10-24	Y	Services next generation design
Awarded		0028	W74V8H04D0036		*	*	\$7,741,142.6	Combination (two or more)	Y	2008-12-04	2010-12-07	Y	CHCS TC2 GUI Interface Development and Sustainment Services
Awarded		0022	W74V8H04D0036		*	*	\$2,556,156.0	Cost Plus Fixed Fee	Y	2007-09-29	2011-09-30	Y	Development /Operation Services
Awarded		0023	W74V8H04D0018		*	*	\$15,926,361.5	Combination (two or more)	Y	2008-09-01	2010-07-19	Y	AHLTA Theater & Convergence
Awarded		D002	W74V8H04D0025		*	*	\$28,478,472.5	Cost Plus Fixed Fee	Y	2009-10-05	2012-12-29	Y	Base Period - Labor
Awarded		0007	W81XWH08D0032	W81XWH05R0004	*	*	\$6,891,988.8	Firm Fixed Price	Y	2010-07-30	2015-06-29	Y	Base Period MSAT Support Services

Table I.C.1 Contracts Table

Contract Status	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	Solicitation ID	Alternative financing	EVM Required	Ultimate Contract Value (M)	Type of Contract/Task Order (Pricing)	Is the contract a Performance Based Service Acquisition (PBSA)?	Effective date	Actual or expected End Date of Contract/Task Order	Extent Completed	Short description of acquisition
Awarded		0046	W74V8H-04-D-0036		*	*	\$3,783,521.7	Cost Plus Fixed Fee	Y	2010-09-30	2013-12-30	Y	GUI Test Completion
Awarded		005	W74V8H04-D-0020	SAC 10-15617	*	*	\$33,435,351.3	Firm Fixed Price	Y	2010-09-30	2013-12-29	Full and Open Competition after exclusion of sources	This award provides for in theater systems support services to enhance the quality and timeliness of support for in theater users of the deployed theater imaging capability.
Awarded	0	0623	GS-35F-0147N	DLB-09-13782	*	*	\$9,381,432.5	Firm Fixed Price	Y	2009-10-01	2012-11-29	Full and Open Competition	This award provides for services to support the DHIMS PMOs Train the Trainer strategy for training the Services Trainers in use and user operation of

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AHLTA software programs.

2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why:

*

3.

- a. Has an Acquisition Plan been developed? If yes, please answer the questions that follow *
- b. Does the Acquisition Plan reflect the requirements of FAR Subpart 7.1 *
- c. Was the Acquisition Plan approved in accordance with agency requirements *
- d. If "yes," enter the date of approval? *
- e. Is the acquisition plan consistent with your agency Strategic Sustainability Performance Plan? *
- f. Does the acquisition plan meet the requirements of EOs 13423 and 13514? *
- g. If an Acquisition Plan has not been developed, provide a brief explanation.

*

Part II: IT Capital Investments

Section A: General

1.
 - a. Confirm that the IT Program/Project manager has the following competencies: configuration management, data management, information management, information resources strategy and planning, information systems/network security, IT architecture, IT performance assessment, infrastructure design, systems integration, systems life cycle, technology awareness, and capital planning and investment control. no
 - b. If not, confirm that the PM has a development plan to achieve competencies either by direct experience or education. yes

2. Describe the progress of evaluating cloud computing alternatives for service delivery to support this investment. Cloud computing will be evaluated as part of SOA, when suitable to support the requirements. TRI-Service IM/IT attempted Platform-as-a-Service for the prototypes but service not mature enough for production.

3. Provide the date of the most recent or planned Quality Assurance Plan 2010-04-06

4.
 - a. Provide the UPI of all other investments that have a significant dependency on the successful implementation of this investment.
 - b. If this investment is significantly dependent on the successful implementation of another investment(s), please provide the UPI(s).

5. An Alternatives Analysis must be conducted for all Major Investments with Planning and Acquisition (DME) activities and evaluate the costs and benefits of at least three alternatives and the status quo. The details of the analysis must be available to OMB upon request. Provide the date of the most recent or planned alternatives analysis for this investment. 1997-12-16

6. Risks must be actively managed throughout the lifecycle of the investment. The Risk Management Plan and risk register must be available to OMB upon request. Provide the date that the risk register was last updated. 2010-11-24

Section B: Cost and Schedule Performance

Table II.B.1. Comparison of Actual Work Completed and Actual Costs to Current Approved Baseline:

Description of Activity	DME or SS	Agency EA Transition Plan Milestone Identifier	Planned Cost (\$M)	Actual Cost (\$M)	Planned Start Date	Actual Start Date	Planned Completion Date	Actual Completion Date	Planned Percent Complete	Actual Percent Complete
Block 1 IOC provides a First Responder Application, electronic field medical card, in/out patient treatment documentation, Command and Control Medical Surveillance Classified/SIPR, Individual Theater Medical Encounters Unclassified/NIP R		*	\$130.7	\$130.7	2002-10-01	2002-10-01	2006-01-31	2006-01-31	100.00%	100.00%
Block 2 Release 1 includes limited enhanced business practices for administratively managing patients. As well as Drug-Allergy/Interaction, Level II Limited Inpatient Documentation, Read Only Access to Clinical Data Repository via AHLTA		*	\$100.4	\$100.4	2004-04-01	2004-04-01	2009-01-30	2009-01-30	100.00%	100.00%
Block 2 Release 2 will converge AHLTA; transfer	DME	*	\$175.9	\$140.7	2007-01-01	2007-01-01	2011-11-01		80.00%	80.00%

Table II.B.1. Comparison of Actual Work Completed and Actual Costs to Current Approved Baseline:

Description of Activity	DME or SS	Agency EA Transition Plan Milestone Identifier	Planned Cost (\$M)	Actual Cost (\$M)	Planned Start Date	Actual Start Date	Planned Completion Date	Actual Completion Date	Planned Percent Complete	Actual Percent Complete
encounters via removable media; Upgrades to Defense Medical Logistics Standard Support; and Patient Movement Items Tracking System (Dates changed due to ongoing re-baseline)										
Block 2 Release 3 will provide the capability to monitor medical readiness for individuals and for groups of individuals (units) within the theater. (Dates changed due to ongoing re-baseline)	DME	*	*	*	2011-07-01	*	2012-12-31	*	*	*
Block 2 Release 4 provides the ability to record and report Food poisoning and Tuberculosis; generate casualty notification data/reports and medical, dental and veterinary care documentation in theater	DME	*	*	*	2011-10-01	*	2012-09-30	*	*	*
Block 2 Release	DME	*	*	*	2012-10-01	*	2013-03-31	*	*	*

Table II.B.1. Comparison of Actual Work Completed and Actual Costs to Current Approved Baseline:

Description of Activity	DME or SS	Agency EA Transition Plan Milestone Identifier	Planned Cost (\$M)	Actual Cost (\$M)	Planned Start Date	Actual Start Date	Planned Completion Date	Actual Completion Date	Planned Percent Complete	Actual Percent Complete
5 provides the capability to access timely dental data; dental digital radiology; and capability to associate dental digital images and results reports with health care encounters during which they were ordered.										
Block 2 Release 6 will transfer all medical data gathered in theater to records and record keeping systems in sustaining base. Includes in/outpatient and medical/dental care; immunizations; pre/post-deployment questionnaires; industrial hygiene	DME	*	*	*	2013-10-01	*	2014-03-31	*	*	*

2. If the investment cost, schedule, or performance variances are not within 10 percent of the current baseline, provide a complete analysis of the reasons for the variances, the corrective actions to be taken, and the most likely estimate at completion. OASD(NII)/DoD CIO submitted letters to the US Senate and US House of Representatives Committees on Armed Services and Appropriation on April 24, 2009. The letters reported actions taken within the Department as required by Section 2445c(d) of Title 10 USC, certifying that TMIP-J is essential to the efficient management of DoD; there is no alternative investment which will provide equal or greater capability at less cost. Variances within threshold.

3. For mixed lifecycle or operations and maintenance investments an Operational Analysis must be performed annually. Operational analysis may identify the need to redesign or modify an asset by identifying previously undetected faults in design, construction, or installation/integration, highlighting whether actual operation and maintenance costs vary significantly from budgeted costs, or documenting that the asset is failing to meet program requirements. The details of the analysis must be available to OMB upon request. Insert the date of the most recent or planned operational analysis. 2010-04-14

4. Did the Operational analysis cover all 4 areas of analysis: Customer Results, Strategic and Business Results, Financial Performance, and Innovation? yes

Section C: Financial Management Systems

Table II.C.1: Financial Management Systems			
System(s) Name	System acronym	Type of Financial System	BY Funding
*	*	*	*

Section D: Multi-Agency Collaboration Oversight (For Multi-Agency Collaborations only)

Table II.D.1. Customer Table:	
Customer Agency	Joint exhibit approval date
NONE	

Table II.D.2. Shared Service Providers		
Shared Service Provider (Agency)	Shared Service Asset Title	Shared Service Provider Exhibit 53 UPI (BY 2011)
*	*	*

Table II.D.3. For IT Investments, Partner Funding Strategies (\$millions):							
Partner Agency	Partner exhibit 53 UPI (BY 2012)	CY Monetary Contribution	CY “In-Kind” Contribution	CY Fee-for-Service	BY Monetary Contribution	BY “In-Kind” Contribution	BY Fee-for-Service
NONE							

Table II.D.4. Legacy Systems Being Replaced		
Name of the Legacy Investment of Systems	Current UPI	Date of the System Retirement
*	*	*

Section E: Performance Information

Table I.E.1a. Performance Metric Attributes

Measurement Area (For IT Assets)	Measurement Grouping (For IT Assets)	Measurement Indicator	Reporting Frequency	Unit of Measure	Performance Measure Direction	Baseline	Year Baseline Established for this measure (Origination Date)
Mission and Business Results	Strategic National and Theater Defense	Percentage of automated theater medical unit status data available to provide a view of overall medical capability of the assigned medical units in accordance with Annex Q of the Operations Plan (OPLAN) for theater command.	semi-annual	Percentage of data	Maintaining	Zero % of automated medical unit status data was electronically available to provide a leadership view of overall medical capability prior to deployment of Theater Medical Information Program (TMIP-J).	2003-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2009	Maintain 100% of medical unit status data tracked in TMIP-J that will be available for theater command to forecast and plan for Military action.	As of 30 Sept 09, 100% of automated theater medical unit status data tracked in TMIP-J has been available to provide a view of overall medical capability.	Met	2010-09-20
Technology	Data Reliability and Quality	Percentage of duplicate theater patient records in the Theater Medical Data Store (TMDS).	annual	Percentage of duplicate records	Decreasing	40% based on DHIMS briefing presented to the Theater Functional Working Group in April 2009.	2009-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2011	Less than 10% of theater patient records in TMDS are duplicates	As of 31 Mar 2011, it is estimated that less than 10% of records in TMDS are duplicates. The target is expected to be met by the end of FY11.	Not Due	2011-04-26

Technology	Data Reliability and Quality	Percentage of duplicate theater patient records in the Theater Medical Data Store (TMDS).	annual	Percentage of duplicate records	Maintaining	40% based on DHIMS briefing presented to the Theater Functional Working Group in April 2009.	2009-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2012	Less than 10% of theater patient records in TMDS are duplicates.	To Be Determined	Not Due	2010-09-20
Technology	Data Reliability and Quality	Percentage of duplicate theater patient records in the Theater Medical Data Store (TMDS). (Note: The target for this measure will decrease over time due to the nature of the indicator).	quarterly	Percentage of duplicate records	Decreasing	40% based on DHIMS briefing presented to the Theater Functional Working Group in April 2009.	2009-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2010	Less than 25% of theater patient records in TMDS are duplicates.	As of 30 Sept 10, it is estimated that approximately 15-18% of records in TMDS are duplicates.	Met	2011-02-11
Processes and Activities	Productivity	Percentage of inpatient theater encounters in the Theater Medical Data Store (TMDS), which are available in the Clinical Data Repository (CDR). (The CDR is currently viewed as the repository for the longitudinal health record).	quarterly	Percentage of encounters	Increasing	0% prior to TMIP data transfer applications and ability of CDR to accept inpatient encounter data.	2003-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2010	40% of the inpatient theater encounters in TMDS are available in the CDR.	As of 30 Sept 10, 0% of the inpatient theater encounters in TMDS are available in the CDR.	Not Met	2011-02-11

The transfer of inpatient records has been delayed due to issues in acquiring the hardware. This target is expected to be met in FY11.

Processes and Activities	Productivity	Percentage of inpatient theater encounters in the Theater Medical Data Store (TMDS), which are available in the Clinical Data Repository (CDR). (The CDR is currently viewed as the repository for the longitudinal health record).	annual	Percentage of inpatient theater encounters	Increasing	0% prior to TMIP data transfer applications and ability of CDR to accept inpatient encounter data	2003-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2011	75% of the inpatient theater encounters in TMDS are available in the CDR.	As of 31 Mar 2011, 0% of the inpatient theater encounters in TMDS are available in the CDR. Target is expected to be met in FY11.	Not Due	2011-04-26
Processes and Activities	Productivity	Percentage of inpatient theater encounters in the Theater Medical Data Store (TMDS), which are available in the Clinical Data Repository (CDR). (The CDR is currently viewed as the repository for the longitudinal health record).	annual	Percentage of inpatient theater encounters	Maintaining	0% prior to TMIP data transfer applications and ability of CDR to accept inpatient encounter data	2003-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2012	75% of the inpatient theater encounters in TMDS are available in the CDR.	To Be Determined	Not Due	2010-09-20
Processes and Activities	Knowledge Management	Percentage of medical encounters captured in	quarterly	Percentage of encounters	Increasing	Zero % of medical encounters captured in	2003-09-30

		the Theater Medical Data Store (TMDS) that are available for medical surveillance (Command and Control (C2)).				the Theater Medical Data Store (TMDS) that are available for medical surveillance (Command and Control (C2)).	
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2009	100% of medical encounters captured in TMDS will be available for medical surveillance use.	As of 30 Sept 09, 100% of medical encounters that were captured in the Theater Medical Data Store (TMDS) were copied to Joint Medical Workstation (JMeWS) where they were available for medical surveillance purposes.	Met	2011-02-11
Mission and Business Results	Strategic National and Theater Defense	Percentage of outpatient theater encounters in the Theater Medical Data Store (TMDS) that are also appropriately available in the Clinical Data Repository (CDR). (The CDR is currently viewed as the repository for the longitudinal health record).	quarterly	Percentage of data	Increasing	Zero % prior to TMIP data transfer applications and ability of CDR to accept data from TMDS.	2003-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2010	70% of the outpatient theater encounters in TMDS will be available in the CDR	As of 30 Sept 10, 100% of the outpatient theater encounters in TMDS are available in the CDR.	Met	2011-02-11
Mission and Business Results	Health Care Delivery Services	Percentage of outpatient theater encounters in the Theater Medical Data Store (TMDS) that are also appropriately available in the Clinical Data Repository (CDR). (The CDR is currently viewed as the repository	quarterly	Percentage of outpatient theater encounters	Increasing	Zero % prior to TMIP data transfer applications and ability of CDR to accept data from TMDS.	2003-09-30

		for the longitudinal health record).					
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2011	90% of the outpatient theater encounters in TMDS will be available in the CDR	As of 31 Mar 2011, 100% of the outpatient theater encounters in TMDS are available in the CDR.	Met	2011-04-26
Mission and Business Results	Health Care Delivery Services	Percentage of outpatient theater encounters in the Theater Medical Data Store (TMDS) that are also appropriately available in the Clinical Data Repository (CDR). (The CDR is currently viewed as the repository for the longitudinal health record).	quarterly	Percentage of outpatient theater encounters	Maintaining	Zero % prior to TMIP data transfer applications and ability of CDR to accept data from TMDS.	2003-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2012	90% of the outpatient theater encounters in TMDS will be available in the CDR	To Be Determined	Not Due	2010-09-20
Customer Results	Availability	Percentage of patient records accessible in TMDS via Bi-directional Health Information Exchange -Theater (BHIE-T) for Service members injured as a result of Operation Enduring Freedom and Operation Iraqi Freedom and receiving VA care.	quarterly	Percentage of records	Increasing	Zero %. Prior to TMIP-J data transfer applications.	2003-09-30
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2009	100% of patient records will be accessible in	As of 30 Sept 09, 100% of patient records were	Met	2011-02-11

Customer Results	Availability	Percentage of patient records accessible in TMDS via Bi-directional Health Information Exchange -Theater (BHIE-T) for Service members injured as a result of Operation Enduring Freedom and Operation Iraqi Freedom and receiving VA care.	quarterly	TMDS via BHIE-T for Service members injured as a result of Operation Enduring Freedom and Operation Iraqi Freedom and receiving VA care	accessible.		
				Percentage of records	Maintaining	Zero %. Prior to TMIP-J data transfer applications.	2003-09-30
			Fiscal Year	Target	Actual Results	Target “Met” or “Not Met”	Last Updated
			2010	100% of patient records will be accessible in TMDS via BHIE-T for Service members injured as a result of Operation Enduring Freedom and Operation Iraqi Freedom and receiving VA care.	As of 30 Sept 10, sharable data for 100% of patients in TMDS is available in BHIE-T.	Met	2011-02-11
Technology	Availability	Percentage of theater inpatient medical data available for healthcare analysis in TMDS.	quarterly	Percentage of patient data	Increasing	Zero %. Prior to TMIP-J data transfer applications.	2003-09-30
			Fiscal Year	Target	Actual Results	Target “Met” or “Not Met”	Last Updated
			2009	100% of theater inpatient medical encounters captured in TMDS will be available for healthcare analysis.	As of 30 Sept 09, 100% of theater inpatient medical encounters captured in the TMDS were available for healthcare analysis.	Met	2010-09-20
Customer Results	Customer Satisfaction	User satisfaction based on TMIP PIR customer survey	annual	Quantification of user satisfaction survey results.	Increasing	Baseline value to be established with first survey to be completed	2010-12-31

						in 2011	
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2011	Percentage improvement above baseline TBD based on baseline survey results.	To Be Determined. This performance is under review. A survey was completed at end of FY 2010 but the data was not statistically significant. Planning in place as to how to make the measurement more measureable and significant.	Not Due	2011-02-11
Customer Results	Customer Satisfaction	User satisfaction based on TMIP PIR customer survey	annual	Quantification of user satisfaction survey results.	Increasing	Baseline value to be established with first survey to be completed in 2011	2010-12-31
			Fiscal Year	Target	Actual Results	Target "Met" or "Not Met"	Last Updated
			2012	Percentage improvement above baseline TBD based on baseline survey results.	To Be Determined	Not Due	2011-02-11

* - Indicates data is redacted.